

Mental Health, Chemical Abuse and Dependency Services Division

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King County Mental Health Advisory Board (MHAB) Regular Meeting February 11, 2014

<u>Members Present</u>: Alicia Glenwell, Katelyn Morgaine, Kristin Houser, Lauren Davis, Maria Davis, Nancy Dow, Toni Krupski, Veronica Kavanagh, Eleanor Owen

<u>Members Absent</u>: John Holecek, Heather Spielvogle (excused); Allan Panitch (unexcused)

<u>Guests Present</u>: Linda Brown, King County Alcoholism and Substance Abuse Administration Board (KCASAAB) Liaison; Susan O'Patka (Ballard Ecumenical Ministries)

Mental Health, Chemical Abuse and Dependency Services Division (MHCADSD)

Staff Present: Bryan Baird, Jean Robertson, Karen Spoelman

I. Welcome and Introductions

Toni Krupski, Chair, convened the meeting at 4:35 p.m., at the Chinook Building, 401 5th Avenue, Seattle, Conference Room 126. She welcomed the members and introductions were made by each person in attendance. A quorum was present for this meeting.

II. Approval of Minutes

The November 12 and December 10, 2013 meeting minutes were approved unanimously. The review and approval of the January 14, 2014 minutes are tabled until next month.

III. Regional Support Network (RSN) / Health Plans Update ~ Karen Spoelman The big, coordinated effort with the plans has been to figure out how the County can do a better job communicating between the service provider community and the health plans around shared clients. The activity embarked upon in the Fall of 2013, was to bring health plan care coordinators and the key clinical program leads from the agencies to a meeting; 56 people attended that meeting, with at

least two individuals, sometimes four, from every mental health provider and each health plan.

The meeting resulted in helpful dialogue where the plans were heard, how they want to work with the individuals they are responsible for, what services they can offer in addition to general insurance related health care support. Other topics discussed were a variety of supports they can provide to get people to treatment and connect more effectively with their primary care physicians. The mental health community talked about what services look like, how plans can be supported, get people to health care and how can the health care community help the County when individuals are discovered with health needs not being met.

Outcomes of this meeting resulted with all the health plan care coordinators providing their contact information; the mental health clinical staff did the same. This valuable resource list is now available to both sides to address medical or behavioral health challenges around a shared consumer.

Another piece the County has been working on is a data sharing process in order to help the plan learn who they have in their care, who is also in a relationship with the County, to communicate in a common, uniform way to exchange information. The County is currently in a process of performing surveys of the plans to discover and share what information they have about the County's population and vice versa through Business Associate Agreements that enable us to share protected health information. The goal of this data sharing is to enable the County to learn what health systems is responsible for clients, what kinds of services they are using in the health system and how that relates to the services they are using in the behavioral health system. This information can help identify who would best address the needs of the individual.

An advantage is the state requires the plans to share their information with the RSN, and the state requires the RSN to share with the plans. There is also hope, after this information exchange process is complete, to share information from RSN to RSN so they can use it to share with the plans in their region through a standardized process.

The County will be doing some pilots with two of the plans, Amerigroup and Community Health Plan of Washington, to work with the individuals with behavioral health issues, who are not receiving the quality of health care they need, and connect them to both medical and behavioral health care.

IV. Chairperson's Report ~ Toni Krupski

Chair Krupski noted there is good representation of consumers on this Board, and good representation from the County, but she is looking for a provider's voice to attend meetings and hear from that important perspective. Chair Krupski encouraged members to engage more with their agency liaison assignment to

obtain more information on how the MHAB can be helpful to them, find out how what it is a provider finds helpful about their work with the County, how is their work facilitated by the County, and in what ways can it be improved. Knowing more about this picture will be helpful to the MHAB.

Eleanor Owen suggested having agencies come do monthly presentations as a standing agenda item. Linda Brown added, when agency presentations were a monthly KCASAAB agenda item, it was very helpful to discover their strengths and challenges. Other suggestions included approaching providers at the monthly Partnership meeting with an invitation from the Board to come speak. It was also suggested the agency board presidents be invited as well. Members plan to move forward with this agency presentation concept beginning in April.

Chair Krupski noted other topics being considered for future board topics and/or presentations, which are:

- Inviting Terry Crain to come discuss the Recovery Plan and Peer Support Services
- Inviting a Crisis Solutions Center professional to provide an update
- Having Susan McLaughlin return to update the Board on Health Care Reform
- Inviting the King County Committee to End Homelessness Chair and learn how this intersects with mental health
- Housing

Lauren Davis offered selecting and focusing on a topic, taking action, and possibly adding an op-ed piece. Chair Krupski delegated Lauren to be the voice of action for the Board.

V. Committee Reports

Legislative Advocacy and Public Affairs Committee (LAPAC) Update

Katelyn Morgaine has been in talks with Seth Dawson, who sent out a nine page list of mental health related bills that will be narrowed down in the coming days.

Lauren Davis added that Katelyn was able to get five meetings with Senators, including King County Republican Senators Andy Hill and Joe Fink, among others on Tuesday, February 25. Constituents are needed from each district to come share their stories. She noted if members know of anyone touched by mental health or substance abuse, to let her and/or Katelyn know.

Katelyn added they also have a meeting with 39th District (a King County district that overlaps with Snohomish County) representatives.

Linda Brown added the KCASAAB, (in the event the MHAB would like to partner with the KCASAAB), is advocating to raise the legal smoking age from 18 to 21 to make it consistent with the alcohol and marijuana laws as this is happening across the country.

The KCASAAB is also tackling the Institutions for Mental Disease (IMD) issue by possibly writing a letter to President Obama and other legislators. As this evolves, the KCASAAB would like to know if the MHAB would be interested in partnering on this topic as well. Eleanor Owen mentioned it is important for the MHAB to look at the motivations of why the law went into effect and why it needs to be changed. Chair Krupski called for volunteers to assist the KCASAAB with this; those volunteers are: Lauren Davis, Kristin Houser, Katelyn Morgaine, and Eleanor Owen.

Membership Committee

Alicia Glenwell spoke to the following points:

- The review and proposed updates to the Board bylaws and the overlap efforts with the work of the Membership Committee around attendance, the application for Board membership, the onboarding process, and the approval of those changes.
- Went over application materials, interview questions, and references checks.
- New language around the conduct of orderly meetings and removal of the reference to Roberts Rules of Order.
- Applications are expected from those seeking membership; none submitted at this time.
- Moving to quarterly meetings as most committee items have been addressed.
- Recruitment methods and goals to be discussed at the next committee meeting with more diversity, various backgrounds, and possibly a provider represented.

Jean mentioned much work was done to revise the bylaws with numerous changes proposed. This work stalled as the bylaws state each change must be reviewed; Alicia suggested reviewing one section at a time to complete this effort. Bryan will send out sections of the revised bylaws to the Membership Committee and Vice Chair Houser.

Veronica Kavanagh mentioned a keyword search, and a place for feedback be included.

Quality Council (QC) Update

Chair Krupski spoke to these QC discussion points:

- Reports were reviewed.
- SAMHSA chose five sites with trauma-informed care grants for which they
 will provide technical assistance for the next 18 months; King County was
 selected as one of these sites. Jean Robertson added this is a virtual
 learning network. Also, all King County network providers will be meeting
 tomorrow to promote and disseminate trauma-informed care.

Recovery Advisory Committee (RAC) Update

Veronica Kavanagh spoke to the following RAC discussion points:

- Discussed the draft practice protocols for recovery and resiliency oriented services as there has been negative feedback from providers in micromanaging, unfunded mandates, and other subsequent challenges.
- Recovery Conference will be at Seattle Central Community College on September 10 and 11, 2014. The poster and poetry contest may be opened up to youth only.
- Upcoming Peer Counselor Trainings in March and again from May 5th through 10th. About 150 people are on the waitlist.
- There is a possibility of having wellness recovery action plan training to be paid for by leftover money in peer counselor training.
- The peer support network meeting was on Saturday, February 8, 2014, with 24 peers. This meeting will rotate locations and a peer will train.
- Recovery Conference Planning is scheduled for Monday, February 24, 2014 from 3:30 p.m. to 5 p.m.

Mental Illness and Drug Dependency (MIDD) Oversight Committee (OC) Update No report.

VI. Staff Report – Jean Robertson Jean gave the following updates:

- Related to the IMD issue, the County learned today that federal legislation, proposed by Congressman Tim Murphy from Pennsylvania, called the "Helping Families in Mental Health Crisis Act" HR3717 with several provisions. In Section 501 (billing under Medicaid; inpatient care restrictions), it is promoting the recommendation of adding language that if care is less than 30 days, it is not residential, but is acute care stay. Jean said we need to support this, but unfortunately, this is purely mental health and does not affect the restriction on detox. Contact your congressional representative to support.
- There were a number of bills around mental health and chemical dependency that were dropped. Some bills are still alive, but are being rapidly amended. There are two substitute bills that are still in play, that will affect us, are bills 6312 and 2639.

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- The consolidation of RSNs from 11 to nine RSNs has been taken out of one version.
- The County received a revised copy of Bill 2572, related to the state healthcare innovation plan; this bill is moving along and includes an all payer claims statewide database.
- Yesterday, the state received the final letter from the Center for Medicare and Medicaid Services (CMS) regarding RSN procurement. The result is a request for proposal procurement will not be required The State must assure CMS it will follow its own procurement rules.
- Distributed in member packets today, is a finalized white paper on funding cuts. A copy is available here: http://www.kingcounty.gov/healthservices/MentalHealth/Board/ArchivedMinutesandMeetingMaterials.aspx.
- Lauren Davis was confirmed to the MHAB by Council today.
- Substitute Senate Bill 6481 is identifying 22 percent of the marijuana excise tax to be expended for evidence-based or research-based peer support services included peer bridger programs; crisis services including: mobile crisis programs, crisis stabilization, crisis triage, inpatient transition support programs, or supportive housing programs. Legislative sponsors are: Oban, Coldwell, and Benton.

VII. Quarterly Liaison Reports

No report.

VIII. Board and Community Concerns

Lauren Davis mentioned House Bill 2315, the Suicide Prevention Bill, that requires suicide prevention training for primary care providers; she is confident this will pass in the House. If this does pass, Washington will become the first state to do so.

IX. Adjournment

There being no further business, the meeting adjourned at 6:30 p.m.

Prepared by:

Bryan Baird, Board Liaison

Attested by:

Toni Krupski, Chair